

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the linesIranian American Political Action Committee - Public Affairs Alliance of Iranian  
America

ADDRESS (number and street)

1350 Connecticut Avenue NW

Suite 202

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00382028

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2008

through

07

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Akbar Ghahary, Ph.D.

Signature of Treasurer

Electronically Filed by Akbar Ghahary, Ph.D.

Date

08

12

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		19192.84
(b) Cash on Hand at Beginning of Reporting Period .....	27789.53	
(c) Total Receipts (from Line 19) .....	2575.18	156836.26
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	30364.71	176029.10
7. Total Disbursements (from Line 31) .....	18129.99	163794.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12234.72	12234.72
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2550.00	155565.03
(i) Itemized (use Schedule A) .....	25.00	1270.00
(ii) Unitemized .....	2575.00	156835.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2575.00	156835.03
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.18	1.23
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2575.18	156836.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2575.18	156836.26

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	18129.99	153794.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	18129.99	153794.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	2500.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18129.99	163794.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18129.99	163794.38

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2575.00	156835.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2575.00	154335.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18129.99	153794.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18129.99	153794.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

**A.**

Full Name (Last, First, Middle Initial)

Nazie Eftekhair

Mailing Address 7201 West 78th Street

City

Bloomington

State

MD

Zip Code

55439

FEC ID number of contributing federal political committee.

C

Name of Employer  
Health EZ, Inc.

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.7674

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Vossoughi

Mailing Address 528 Roxbury Lane

City

Losgatos

State

CA

Zip Code

95032

FEC ID number of contributing federal political committee.

C

Name of Employer  
CISCO Systems Inc.

Occupation  
IT Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.7672

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

2550.00

**TOTAL** This Period (last page this line number only) .....

2550.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

<b>A.</b> Full Name (Last, First, Middle Initial) Amtrak	<b>Transaction ID:</b> SB21B.7675 <b>Date of Disbursement</b>																				
Mailing Address 60 Massachusetts Avenue NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	8												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td>74.00</td> </tr> </table>	74.00																			
74.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America	<b>Transaction ID:</b> SB21B.7676 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 150462	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	8												
City Hartford State CT Zip Code 06115	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll taxes	<table border="1"> <tr> <td>249.38</td> </tr> </table>	249.38																			
249.38																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America	<b>Transaction ID:</b> SB21B.7696 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 150462	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	0	8												
City Hartford State CT Zip Code 06115	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Credit card processing fee	<table border="1"> <tr> <td>32.79</td> </tr> </table>	32.79																			
32.79																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

356.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

<b>A.</b> Full Name (Last, First, Middle Initial) Bonner Group Inc.	<b>Transaction ID:</b> SB21B.7678 <b>Date of Disbursement</b>																				
Mailing Address 729 15th Street NW #3	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	0	8												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fax and courier reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">25.27</td> </tr> </table>	25.27																			
25.27																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Constant Contact	<b>Transaction ID:</b> SB21B.7679 <b>Date of Disbursement</b>																				
Mailing Address 1601 Trapelo Road Suite 246	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	7		2	0	0	8												
City Waltham State MA Zip Code 02451	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Newsletter Candidate Name	<table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table>	35.00																			
35.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) D. C. Treasurer	<b>Transaction ID:</b> SB21B.7681 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 7792	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	8												
City Washington State DC Zip Code 20044	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">254.00</td> </tr> </table>	254.00																			
254.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**314.27**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 12

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

**A.**

Full Name (Last, First, Middle Initial)

D. C. Treasurer

Mailing Address P.O. Box 7792

City  
Washington

State  
DC

Zip Code  
20044

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7682

Date of Disbursement

/   /

Amount of Each Disbursement this Period

58.31

**B.**

Full Name (Last, First, Middle Initial)

Department of Employment Security

Mailing Address P.O. Box 96664

City  
Washington

State  
DC

Zip Code  
20090

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7683

Date of Disbursement

/   /

Amount of Each Disbursement this Period

104.05

**C.**

Full Name (Last, First, Middle Initial)

Morad Ghorban

Mailing Address 2227 20th Street NW  
Apt. 506

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7686

Date of Disbursement

/   /

Amount of Each Disbursement this Period

687.00

**SUBTOTAL** of Disbursements This Page (optional) .....

849.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

<b>A.</b> Full Name (Last, First, Middle Initial) Linkore LLC	<b>Transaction ID:</b> SB21B.7684 <b>Date of Disbursement</b>																				
Mailing Address 3723 Haven Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	6		2	0	0	8												
City Menlo Park State CA Zip Code 94025	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Web hosting Candidate Name	<table border="1"> <tr> <td colspan="10">45.00</td> </tr> </table>	45.00																			
45.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Taeiss Mojazza	<b>Transaction ID:</b> SB21B.7694 <b>Date of Disbursement</b>																				
Mailing Address 3 Callista Terrace	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	0	8												
City Westford State MA Zip Code 02886	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consultant:Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">14000.00</td> </tr> </table>	14000.00																			
14000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Taeiss Mojazza	<b>Transaction ID:</b> SB21B.7695 <b>Date of Disbursement</b>																				
Mailing Address 3 Callista Terrace	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	0	8												
City Westford State MA Zip Code 02886	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consultant:Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">693.00</td> </tr> </table>	693.00																			
693.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**14738.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

**A.**

Full Name (Last, First, Middle Initial)

Olives

Mailing Address 1600 K Street NW

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7689

Date of Disbursement

07 / 07 / 2008

Amount of Each Disbursement this Period

86.53

**B.**

Full Name (Last, First, Middle Initial)

On the Avenue

Mailing Address 2178 Broadway and 77th Streets

City  
New York

State  
NY

Zip Code  
10024

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7690

Date of Disbursement

07 / 02 / 2008

Amount of Each Disbursement this Period

33.90

**C.**

Full Name (Last, First, Middle Initial)

PayPal

Mailing Address P O Box 143255

City  
San Jose

State  
CA

Zip Code  
90222

Purpose of Disbursement  
Credit card processing fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7691

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

59.95

**SUBTOTAL** of Disbursements This Page (optional) .....

180.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Iranian American Political Action Committee - Public Affairs Alliance of Iranian America

**A.**

Full Name (Last, First, Middle Initial)

Perkins Coie

Mailing Address 1201 Third Avenue  
40th Floor

City State Zip Code  
Seattle WA 88101

Purpose of Disbursement  
Legal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.7692

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

1423.21

**B.**

Full Name (Last, First, Middle Initial)

T-Mobile

Mailing Address P O Box 37380

City State Zip Code  
Albuquerque NM 87176

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.7693

Date of Disbursement

07 / 14 / 2008

Amount of Each Disbursement this Period

75.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1498.21

**TOTAL** This Period (last page this line number only) .....

17936.39